

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GUN RIGHTS AMERICA

ADDRESS (number and street)

2300 W EISENHOWER BLVD

Check if different  
than previously  
reported. (ACC)

LOVELAND

CO

80537-3150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00742635

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election  
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election  
Year Only)
- ☐ Apr 20 (M4) ☒ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2020

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

BACKER, DAN, , ,

Type or Print Name of Treasurer

Signature of Treasurer

BACKER, DAN, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 20 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GUN RIGHTS AMERICA

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
06		01		2020

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2020</div></div>		<div><div></div><div>0.00</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>20000.00</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>11000.00</div></div>	<div><div></div><div>31000.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>31000.00</div></div>	<div><div></div><div>31000.00</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>24120.87</div></div>	<div><div></div><div>24120.87</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>6879.13</div></div>	<div><div></div><div>6879.13</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**GUN RIGHTS AMERICA**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	2	0

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	0

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

11000.00

31000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

11000.00

31000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

11000.00

31000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

11000.00

31000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

11000.00

31000.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	24120.87	24120.87
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24120.87	24120.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24120.87	24120.87

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11000.00	31000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11000.00	31000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: F3XN  
Transaction ID :

THE FOLLOWING TRANSACTION ID # REFERS TO ESTIMATED IE'S FILED BY THE COMMITTEE THAT  
WERENOT, ULTIMATELY, EXECUTED: E6A3D9E030B5249808CF, E6D04EA49D7A243AD9FD,  
EC9D98EA0A695443CA3D, ECB230F01B3474DD29CB, E5C2F7BA44A1E4695935, EDCD5CDF51ACE443D97A

Form/Schedule:  
Transaction ID:

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 23  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**GUN RIGHTS AMERICA**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### A. NATIONAL ASSOCIATION FOR GUN RIGHTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELAND

State  
CO

Zip Code  
80537-3150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

24000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 04 / 2020

Transaction ID : A8AD2C42F2B3D46F6B33

Amount of Each Receipt this Period

4000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### B. NATIONAL ASSOCIATION FOR GUN RIGHTS

Mailing Address 2300 W EISENHOWER BLVD

City  
LOVELAND

State  
CO

Zip Code  
80537-3150

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 25 / 2020

Transaction ID : A47EA24963CF641FCBDA

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

### C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

11000.00

11000.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 8 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <b>▶</b> New report    Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CDR COMMUNICATIONS, INC.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  06 / 01 / 2020 </div>	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1415.00 </div>	
City BURKE	State VA	Zip Code 22015-4281		
Purpose of Expenditure LATE ARRIVING PRODUCTION COSTS FOR TRANS ID:...4042A6A AND 47F0A00.		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>EB6AE909DA85E4A01994</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  06 / 08 / 2020 </div>	
Name of Federal Candidate: MCMURTRY, TODD, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CDR COMMUNICATIONS, INC.</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  06 / 01 / 2020 </div>	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 9750.00 </div>	
City BURKE	State VA	Zip Code 22015-4281		
Purpose of Expenditure TELEVISION ADVERTISING		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Transaction ID : <b>E61DEA2B126A547F0A00</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY  05 / 28 / 2020 </div>	
Name of Federal Candidate: MCMURTRY, TODD, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px; display: inline-block;">11165.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	▶ <span style="border: 1px solid black; padding: 2px; display: inline-block;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	▶ <span style="border: 1px solid black; padding: 2px; display: inline-block;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 20 / 2020

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 9 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Full Name of Payee <b>CDR COMMUNICATIONS, INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 01 / 2020	
Mailing Address 9310 OLD KEENE MILL RD STE B			Amount <span style="border: 1px solid black; padding: 2px;">2197.00</span>	
City BURKE	State VA	Zip Code 22015-4281	Transaction ID : <b>E1C8FA22075144042A6A</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 05 / 28 / 2020	
Purpose of Expenditure RADIO ADVERTISING			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>CPMM SERVICES GROUP INC.</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 01 / 2020	
Mailing Address 3785 INDIANOLA AVE			Amount <span style="border: 1px solid black; padding: 2px;">3499.04</span>	
City COLUMBUS	State OH	Zip Code 43214-3754	Transaction ID : <b>EC455C100CDD4435CB1/</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
Purpose of Expenditure ESTIMATED JUNE MAIL VOTER CONTACT			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	
Name of Federal Candidate: MASSIE, THOMAS, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">2197.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 20 / 2020	

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CPMM SERVICES GROUP INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>3785 INDIANOLA AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">3253.59</div>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43214-3754</b>	<b>Transaction ID : E2D8FC923446042D394F</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. MAIL VOTER CONTACT: SEE EST TRANS ID: ...45DF972			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">23439.63</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item <b>CPMM SERVICES GROUP INC.</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>3785 INDIANOLA AVE</b>			Amount <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: right;">632.64</div>	
City <b>COLUMBUS</b>	State <b>OH</b>	Zip Code <b>43214-3754</b>	<b>Transaction ID : E1DEDD4289CD547FBAC</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px; width: 20%;">M M /</div> <div style="border: 1px solid black; padding: 2px; width: 20%;">D D /</div> <div style="border: 1px solid black; padding: 2px; width: 60%;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT FOR 6/1/2020 EST. MAIL VOTER CONTACT: SEE EST TRANS ID: ...45DF972			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; width: 150px; text-align: right;">26192.27</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	3886.23
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

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Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 11 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>CPMM SERVICES GROUP INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2020	
Mailing Address 3785 INDIANOLA AVE			Amount <span style="border: 1px solid black; padding: 2px;">632.64</span>	
City COLUMBUS	State OH	Zip Code 43214-3754	Transaction ID : <b>EF724CC119AA5405882D</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 19 / 2020	
Purpose of Expenditure PMT FOR 6/1/2020 EST. MAIL VOTER CONTACT: SEE EST TRANS ID: ...45DF972		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">28984.91</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>CPMM SERVICES GROUP INC.</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 29 / 2020	
Mailing Address 3785 INDIANOLA AVE			Amount <span style="border: 1px solid black; padding: 2px;">2645.00</span>	
City COLUMBUS	State OH	Zip Code 43214-3754	Transaction ID : <b>ECEFC338CBFD1485FAB</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 29 / 2020	
Purpose of Expenditure PMT FOR 6/1/2020 EST. MAIL VOTER CONTACT: SEE EST TRANS ID: ...45DF972		Category/ Type <span style="border: 1px solid black; padding: 2px;"></span>		
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">31974.91</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">3277.64</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"></span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 20 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 12 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>				FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report				New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>CPMM SERVICES GROUP INC.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 29 / 2020		
Mailing Address 3785 INDIANOLA AVE			Amount <span style="border: 1px solid black; padding: 2px;">345.00</span>		
City COLUMBUS	State OH	Zip Code 43214-3754	Transaction ID : <b>E378FF07942714565BA7</b>		
Purpose of Expenditure PMT FOR 6/1/20 EST. MAIL VOTER CONTACT: SEE EST TRANS ID: ...435CB1A		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 29 / 2020		
Name of Federal Candidate: MASSIE, THOMAS, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">31974.91</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 03 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">167.00</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : <b>E6F0C4F9C55AD4768BB8</b>		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 15 / 2020		
Name of Federal Candidate: MASSIE, THOMAS, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px;">24939.63</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">512.00</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 20 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> Amends report filed on <span style="margin-left: 20px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block;">             M M / D D / Y Y Y Y Y Y           </div> </span>	

Full Name of Payee <b>FACEBOOK</b>	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">             M M / D D / Y Y Y Y Y Y              06 / 03 / 2020           </div>
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">             292.00           </div> <b>Transaction ID : E820AABF8112B48BFB6F</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">             M M / D D / Y Y Y Y Y Y              06 / 17 / 2020           </div>
City <b>MENLO PARK</b>	State <b>CA</b>	
Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">             24939.63           </div>		Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>FACEBOOK</b>	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">             M M / D D / Y Y Y Y Y Y              06 / 03 / 2020           </div>
Mailing Address <b>1 HACKER WAY</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">             666.00           </div> <b>Transaction ID : E2E16D66EEFED4EF098C</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">             M M / D D / Y Y Y Y Y Y              06 / 22 / 2020           </div>
City <b>MENLO PARK</b>	State <b>CA</b>	
Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">             24939.63           </div>		Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	958.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 07 / 20 / 2020

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 14 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 03 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">290.44</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E3CCE5108A5CD46528CF		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 24 / 2020		
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">24939.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 03 / 2020		
Mailing Address 1 HACKER WAY			Amount <span style="border: 1px solid black; padding: 2px;">61.59</span>		
City MENLO PARK	State CA	Zip Code 94025-1456	Transaction ID : E19BDF003EFBD4621A89		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 09 / 2020		
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">24939.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">352.03</span>		
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>		
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
BACKER, DAN, , , Signature		[Electronically Filed]		Date <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 20 / 2020	

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on  /  / 

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>1 HACKER WAY</b>			Amount <input type="text"/> 458.00 <b>Transaction ID : E3652E30985034DC198F</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <input type="text"/>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 24939.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>1 HACKER WAY</b>			Amount <input type="text"/> 444.00 <b>Transaction ID : E414FFB1765B04EE38B7</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type <input type="text"/>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 24939.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<input type="text"/> 902.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<input type="text"/>
(c) TOTAL Independent Expenditures .....	▶	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

 /  / 

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 16 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">160.01</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975</b>		Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	Transaction ID : <b>E531BA74E40094364AB1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">156.00</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure <b>PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975</b>		Category/Type <div style="border: 1px solid black; padding: 2px; width: 50px;"></div>	Transaction ID : <b>E19A44E09943640F2A3E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>MASSIE, THOMAS, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	316.01
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Signature



**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 17 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00742635       </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <span style="margin-left: 20px;">New report</span> <span style="margin-left: 20px;">Amends report filed on</span> <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50.53</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E46E5359BD83B48F485F</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate: <b>MASSIE, THOMAS, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>				

Full Name of Payee <input type="checkbox"/> Memo Item <b>FACEBOOK</b>			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">96.81</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : EFBAB7794EC0E4311814</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between; width: 100%;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975			Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>	
Name of Federal Candidate: <b>MASSIE, THOMAS, , ,</b>			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>				

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	147.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 18 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30.80</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E9519AD581C6846858B6</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Purpose of Expenditure <b>PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F</b>			Category/Type <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">108.00</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E714AE32C2CE548068E9</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Purpose of Expenditure <b>PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975</b>			Category/Type <div style="border: 1px solid black; width: 100px; height: 20px;"></div>	
Name of Federal Candidate: <b>MASSIE, THOMAS, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;">138.80</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

MM / DD / YYYY

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 19 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22.82</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F		Category/ Type	Transaction ID : <b>EC62592F8D9B34E999F3</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>FACEBOOK</b> <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">234.00</div>	
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>		
Purpose of Expenditure PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...42CF975		Category/ Type	Transaction ID : <b>EB922D863F2574357996</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M / D D / Y Y Y Y Y Y</div> </div>	
Name of Federal Candidate: <b>MASSIE, THOMAS, , ,</b> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <b>04</b> State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	256.82
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures .....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 20 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> <span style="font-size: 1.5em; margin-right: 5px;">C</span> <span>C00742635</span> </div>
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 Check if ☐ 24-hour report ☐ 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee <b>FACEBOOK</b>			<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>1 HACKER WAY</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12.00</div>		
City <b>MENLO PARK</b>	State <b>CA</b>	Zip Code <b>94025-1456</b>	<b>Transaction ID : E516384453CCA4A1C984</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>		
Purpose of Expenditure <b>PMT FOR EST FROM 6/1/2020. ONLINE VOTER CONTACT. SEE EST. TRANS. ID#...4A7C86F</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">24939.63</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

Full Name of Payee <b>GOOGLE</b>			<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>	
Mailing Address <b>PO BOX 3900</b>			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1125.00</div>		
City <b>SAN FRANCISCO</b>	State <b>CA</b>	Zip Code <b>94139-0001</b>	<b>Transaction ID : EC9D98EA0A695443CA3E</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <span>MM / DD / YYYY</span> </div>		
Purpose of Expenditure <b>ESTIMATED JUNE ONLINE VOTER CONTACT</b>			Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: <b>MCMURTRY, TODD, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>04</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">23439.63</div>		
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			2020		

(a) SUBTOTAL of Itemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">12.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,

[Electronically Filed]

Date

MM / DD / YYYY

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 21 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>GOOGLE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 01 / 2020	
Mailing Address PO BOX 3900			Amount <span style="border: 1px solid black; padding: 2px;">375.00</span>	
City SAN FRANCISCO	State CA	Zip Code 94139-0001	Transaction ID : <b>ECB230F01B3474DD29CB</b>	
Purpose of Expenditure ESTIMATED JUNE ONLINE VOTER CONTACT		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: MASSIE, THOMAS, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <b>MUDSHARE</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 09 / 2020	
Mailing Address 325 E JIMMIE LEEDS RD STE 117			Amount <span style="border: 1px solid black; padding: 2px;">2160.00</span>	
City GALLOWAY	State NJ	Zip Code 08205-4126	Transaction ID : <b>EDCD5CDF51ACE443D97</b>	
Purpose of Expenditure ESTIMATED JUNE TEXT MESSAGING		Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">28352.27</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			<span style="border: 1px solid black; padding: 2px;"> </span>	
(c) TOTAL Independent Expenditures .....			<span style="border: 1px solid black; padding: 2px;"> </span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
BACKER, DAN, , , Signature			Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 20 / 2020	

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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 22 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report			New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	

  

Full Name of Payee <b>NATIONAL ASSOCIATION FOR GUN RIGHTS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 01 / 2020	
Mailing Address 2300 W EISENHOWER BLVD			Amount <span style="border: 1px solid black; padding: 2px;">37.50</span> Transaction ID : E6A3D9E030B5249808CF Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
City LOVELAND	State CO	Zip Code 80537-3150		
Purpose of Expenditure ESTIMATED JUNE ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: MASSIE, THOMAS, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: KY <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

Full Name of Payee <b>NATIONAL ASSOCIATION FOR GUN RIGHTS</b> <input checked="" type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 06 / 01 / 2020	
Mailing Address 2300 W EISENHOWER BLVD			Amount <span style="border: 1px solid black; padding: 2px;">37.50</span> Transaction ID : E6D04EA49D7A243AD9F1 Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span>	
City LOVELAND	State CO	Zip Code 80537-3150		
Purpose of Expenditure ESTIMATED JUNE ONLINE VOTER CONTACT		Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>		
Name of Federal Candidate: MCMURTRY, TODD, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 04 State: KY <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">23439.63</span>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

  

(a) SUBTOTAL of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) TOTAL Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

BACKER, DAN, , ,  
Signature
[Electronically Filed] Date MM / DD / YYYY  
07 / 20 / 2020

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 23 OF 23  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>GUN RIGHTS AMERICA</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00742635	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		New report Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Full Name of Payee <b>PATTERSON CONSULTING, LLC</b> <input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 06 / 08 / 2020	
Mailing Address 866 LOMBARD RD		Amount <span style="border: 1px solid black; padding: 2px;">620.00</span>	
City RISING SUN	State MD	Zip Code 21911-1738	Transaction ID : <b>E5C2F7BA44A1E4695935</b>
Purpose of Expenditure ESTIMATED JUNE PHONE VOTER CONTACT		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Name of Federal Candidate: MCMURTRY, TODD, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KY	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">26192.27</span>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee  <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	
Mailing Address  		Amount <span style="border: 1px solid black; padding: 2px;"></span>	
City  	State  	Zip Code  	Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Purpose of Expenditure  		Category/Type <span style="border: 1px solid black; padding: 2px;"></span>	
Name of Federal Candidate:  		Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;"></span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">0.00</span>	
(b) SUBTOTAL of Unitemized Independent Expenditures.....		<span style="border: 1px solid black; padding: 2px;"></span>	
(c) TOTAL Independent Expenditures .....		<span style="border: 1px solid black; padding: 2px;">24120.87</span>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
BACKER, DAN, , , Signature		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 07 / 20 / 2020	

[Electronically Filed]